

OPEN BOARD MINUTES
NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS
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A meeting of the New Jersey State Board of Medical Examiners was held on Wednesday, January 7, 2015, at the Richard J. Hughes Justice Complex, 25 Market Street, 4th Floor Conference Center, Trenton, New Jersey. The meeting was called to order by President Stewart Berkowitz, M.D.

PRESENT

Board Members Angrist, Stewart Berkowitz, Cheema, Criss, DeGregorio, DeLuca, Kubiel, Lopez, Miksad, Miller, Rao, Scott and Shah.

EXCUSED

Board Members Steven Berkowitz, Maffei, Metzger, McGrath, Parikh, and Rock.

ALSO PRESENT

Sharon Joyce, Assistant Attorney General; Senior Deputy Attorneys General Dick, Flanzman, and Gelber; Deputy Attorneys Hafner, Levine, and Puteska; William V. Roeder, Executive Director of the Medical Board, Sindy Paul, M.D., Medical Director; Dr. Harry Lessig, Consultant Medical Director.

**STATEMENT CONCERNING THE
ANNUAL NOTICE OF PUBLIC MEETINGS**

The requirements of the “Open Public Meetings Act” were satisfied by notice of this meeting given in the annual notice adopted by the New Jersey State Board of Medical Examiners on

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September 10, 2014 which was transmitted to the ATLANTIC CITY PRESS, STAR LEDGER, CAMDEN COURIER POST, ASBURY PARK PRESS, BERGEN RECORD and the TRENTON TIMES, all on the 24th day of September 2014.

ANNOUNCEMENTS

Kim Ringler, who had the privilege of working with the Board as a Deputy in the prosecution section, introduced herself as the newly appointed Deputy Director for the Division of Consumer Affairs. She thanked the Board members for its service and noted that she had high regard for the work that the Board performs. She expressed her appreciation for the time each member dedicates to the important work that needs to be done by this Board to accomplish its mission of protection of the public. She hoped that in collaborating together, the Division and the Board would continue to achieve its goals.

She also introduced the Acting Insurance Fraud Prosecutor, Ron Chilemi. He informed the Board that in the past four years about 50% of his cases have dealt with healthcare fraud. He too recognized that the importance of the work of the Board. He hoped moving forward there can be more collaboration between the two agencies. The interests of both were the same and he believed working together, the issues of insurance fraud and deceptive practices could be better addressed.

NEW BUSINESS
LEGISLATION

A 3949 Seeks to require full pay for certain health care and public safety workers placed in isolation or quarantine.

THE BOARD, UPON MOTION MADE AND
SECONDED, VOTED TO SUPPORT THE PROPOSED
LEGISLATION.

The motion, made by Dr. Angrist and seconded by Dr. Shah, carried unanimously.

S 1184 Seeks to revise the requirements for licensure and creates physician-delegated scope of practice for physician assistants.

The Board noted the number of revisions were made to this bill since its introduction, in particular the requirements of the medical malpractice and the consult required with CDS prescribing.

In addressing a number of other issues, Board member Lopez

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addressed the Board to clarify some of the concerns previously voiced by the Board. She explained that the Physician Assistant Group has been working over the last three years with various groups so that it may continue to work under the team approach, which is the model of the PA practice. In short, she further explained that the PA community is not seeking an independent practice. The addition of the delegated agreement requirement is actually seeking to firm up the supervision of the PA by the supervising physician, who would share the scope of practice as the PA. It is meant to strengthen the supervisory role, not eliminate it. This is an added requirement. The National trend is to remove the co signature requirement and is consistent with a number of other additional specialty societies. It creates an additional burden for the supervisory physician and does not create any further protections for patient safety. A question was raised how a physician would be supervising a PA if it would not be aware of the prescription – in reality the way that the counter signatures which aren't required in the out patient setting and within 24 hours in the in patient setting, currently works does not add the protection it seeks to achieve. The order has been written and administered long before the counter signature. In an ever-changing healthcare environment, it is difficult to continue to stay abreast with the manner in which a practice occurs. The PA community believed that it addressed all of the Board's prior concerns and has proposed these amendments to bring the PA practice more in line with the team model and current trends.

**THE BOARD, UPON MOTION MADE AND
SECONDED, VOTED TO SUPPORT THE
LEGISLATION AS AMENDED.**

The Motion was made by Ms. Criss, seconded by Dr. Shah and carried unanimously.

**S 1998-2119 Seeks to revise certain provisions of the
New Jersey Prescription Monitoring
Program**

Overall, the Board supported the amendments contemplated by these proposed bills. It continued to raise, however, concerns about the expansion of the availability of the information to patients, mental health care personnel and law enforcement as it did not appear to reach the appropriate balance between confidential, privacy issues and legitimate use of the information collected. It supported the sharing of information by and among states so long as the protections afforded by our law were honored by the other states with whom the information would be shared.

The Board strongly opposed the expansion of the accessibility of the PMP information to medical assistants, who are not a licensed category within the Division of Consumer Affairs. While the committee was supportive of the ability to delegate accessing the information by the practitioner, it did not believe that it should go

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beyond a licensed health care practitioner under the jurisdiction of the Division of Consumer Affairs. To that end, it also recommended that Certified Nurse Midwives be included within the definition of a licensed health care practitioner.

**THE BOARD, UPON MOTION MADE AND
SECONDED, VOTED TO SUPPORT THE
LEGISLATION WITH THE ABOVE COMMENTS.**

The Motion was made by Dr. Scott and seconded by Dr. Cheema. It carried unanimously.

S 2578 Seeks to Authorize Optometrists to continue to prescribe medications containing hydrocodone notwithstanding the federal rescheduling of hydrocodone from Schedule III to Schedule II.

This bill was referred to the Executive Committee for review with the current scope of practice statutory provisions.

S 2596 Seeks to exempt certain vehicles owned or leased by certain health care facilities or used to transport people with disabilities from “Angelie’s Law”

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Ms. Miller recused from discussion and vote in this matter and left the table.

**THE BOARD, UPON MOTION MADE AND
SECONDED, VOTED TO SUPPORT THE
LEGISLATION.**

The Motion was made by Dr. Cheema and seconded by Ms. Kubiel. It carried unanimously.

OLD BUSINESS

Nothing Scheduled.

INFORMATIONAL

Nothing provided.

PUBLIC COMMENT